## 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Now or Never PAC	
	C C00513432
Check if X 24-hour report 48-hour report New report Amends report filed	on Mam / Dad / Yayayay
Full Name of Payee	Date of Public Distribution/Dissemination
Patrick Media	M M / D D / Y Y Y Y
Mailing Address 200 W Jefferson	
	Amount
City State Zip Code	1868.75
Marshfield MO 65706	Transaction ID : SE.4537 Date of Disbursement or Obligation
Purpose of Expenditure  Modic production  Category/	M M / D D / Y Y Y Y
Media production Outgoin Type 004	06 24 2014
Name of Federal Candidate Support Office	e Sought: House District: 00
THAD COCHRAN Oppose	President Senate State: MS
	ursement For: Primary General
Per Election for Office Sought 93514.75 2014	Other (specify) ► Runoff
Full Name of Payee	Date of Public Distribution/Dissemination
	M M / D D / Y Y Y Y
Mailing Address	
	Amount
City State Zip Code	
	D. C. (Diller of College)
Purpose of Expenditure Category/	Date of Disbursement or Obligation
Type	
Name of Federal Candidate Support Office	e Sought: House District:
Oppose	President Senate State:
	ursement For: Primary General
Per Election for Office Sought	Other (specify)
, ,	Uniter (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	1868.75
(1) 000 100 112 of 100	7 1000.10
(b) SUBTOTAL of Unitemized Independent Expenditures	
· ·	7 7
(c) TOTAL Independent Expenditures	1868.75
	77-1-77-1-77-1
Under penalty of perjury I certify that the independent expenditures reported herein were not may	ada in cooperation, consultation, or concert
with, or at the request or suggestion of, any candidate or authorized committee or agent of either	• • • • • • • • • • • • • • • • • • • •
party committee) any political party committee or its agent.	
James C Thomas III	M / D D / Y Y Y
[Electronically Filed] Date	24 2014
Signature	